

# STATEMENT OF ORGANIZATION

OFFICE USE ONLY

**1. Name and Address of Committee**

Louisiana Veterinary Medical Association Poli  
8550 United Plaza Blvd.  
Suite 1001  
Baton Rouge LA 70809

**2. Date of this Statement**

01/23/2015

**3. Estimated Membership**

100

**4. Amended Statement?**

Yes ☒ No

PAC  
5/0  
1/30

#896572  
#2686

15000944

Check if new committee ☐

**5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)**

**Position Name Address**

Chairperson

Treasurer

Please see attached sheets.

**6. Affiliated Organizations**

(Any organization, other than a political committee, which directly or indirectly established, administrators or financially supports this committee.)

**Name Address Relationship to Committee**

Please see attached sheets.

**7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions)**

**Name Address**

Please see attached sheets.

**8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE:** a. Check one: ☐ Principal Campaign Committee ☐ Subsidiary Committee

**b. Name of Candidate**

**c. Office Sought by the Candidate**

Please see attached sheets.

**9. Name of Person Preparing Report**

**Daytime Telephone**

Please see attached sheets.

**10. WE HEREBY CERTIFY** that the information contained in this **STATEMENT OF ORGANIZATION** is true and correct to the best of our knowledge, information and belief.

Dated 01/23/2015.

**HAND DELIVERED**

Dr. Alfred Stevens

Signature of Committee Chairperson

225-293-6440

Daytime Telephone Number

Signature of Committee Treasurer, if any

Daytime Telephone Number

# Affiliated Persons / Organizations

3 / 3

<p><b>Name and Address of Chair Person</b>          Alfred G. Stevens          3803 S. Sherwood Forest Blvd.           Baton Rouge LA 70816</p> <p><b>Chairperson:</b></p>	<p><b>Candidate Information</b>  <b>Office Sought (Include title of office as well as parish, city, town and/or election district)</b></p> <p><b>Name of Political Party:</b>  <input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee</p>
<p><b>Daytime Telephone (Preparer):</b></p>	<p><b>Rel of Aff. Org. to Comm:</b></p>
<p><b>Name and Address of Person Preparing Report</b>          H. Bland O'Connor          8550 United Plaza Blvd.          Suite 1001          Baton Rouge LA 70809</p> <p><b>Chairperson:</b></p>	<p><b>Candidate Information</b>  <b>Office Sought (Include title of office as well as parish, city, town and/or election district)</b></p> <p><b>Name of Political Party:</b>  <input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee</p>
<p><b>Daytime Telephone (Preparer):</b> 225/928-5862</p>	<p><b>Rel of Aff. Org. to Comm:</b></p>
<p><b>Name and Address of</b>          Louisiana Veterinary Medical Assn.          8550 United Plaza Blvd.          Suite 1001          Baton Rouge LA 70809</p> <p><b>Chairperson:</b></p>	<p><b>Candidate Information</b>  <b>Office Sought (Include title of office as well as parish, city, town and/or election district)</b></p> <p><b>Name of Political Party:</b>  <input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee</p>
<p><b>Daytime Telephone (Preparer):</b></p>	<p><b>Rel of Aff. Org. to Comm:</b> professional organization</p>
<p><b>Name and Address of Financial Institution</b>          Whitney National Bank          3617 S. Sherwood Forest Blvd           Baton Rouge LA 70816</p> <p><b>Chairperson:</b></p>	<p><b>Candidate Information</b>  <b>Office Sought (Include title of office as well as parish, city, town and/or election district)</b></p> <p><b>Name of Political Party:</b>  <input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee</p>
<p><b>Daytime Telephone (Preparer):</b></p>	<p><b>Rel of Aff. Org. to Comm:</b></p>